JUL 0 9 2001 Ξ lease type a plus sign (+) inside this box \to $\overline{\times}$ PTO/SB/21 (08-60)
Approved for use through 10/31/2002. OMB 0651-0031
U.S. Patent and Trademark Office: U.S. DEPARTMENT OF COMMERCE
o a collection of information unless it discloses a collection unless it discloses a collection of information unless it discloses a collection of information unless it discloses a collection of information unless it discloses a collec Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number. Application Number TRANSMITTAL **Filing Date** Timothy P. Regan **FORM** First Named Inventor Group Art Unit (to be used for all correspondence after initial filing) **Examiner Name** Attorney Docket Number Total Number of Pages in This Submission **ENCLOSURES** (check all that apply) After Allowance Communication Assignment Papers (for an Application) Fee Transmittal Form X to Group Appeal Communication to Board X Fee Attached X Drawing(s) of Appeals and Interferences Appeal Communication to Group Licensing-related Papers Amendment / Reply (Appeal Notice, Brief, Reply Brief) ij Petition After Final Proprietary Information Petition to Convert to a Affidavits/declaration(s) Provisional Application Status Letter <u>[.</u>_ Power of Attorney, Revocation Change of Correspondence Address 1.3 Other Enclosure(s) (please **Extension of Time Request** identify below): Ö Terminal Disclaimer 13 **Express Abandonment Request** 31 Request for Refund X Information Disclosure Statement CD, Number of CD(s) _____ Certified Copy of Priority ١.D Document(s) Remarks Response to Missing Parts/ Incomplete Application Response to Missing Parts under 37 CFR 1.52 or 1.53 SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT Firm Timothy P. Regan Individual name Signature Date July 6, 2001 CERTIFICATE OF MAILING I hereby certify that this correspondence is being deposited with the United States Postal Service with sufficient postage as first class July 7, 2001 mail in an envelope addressed to: Commissioner for Patents, Washington, DC 20231 on this date: Timothy P. Regan Typed or printed name I with P. Ry Date July 7, 2001 Signature

PTO/SB/17 (11-00)

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Patent fees are subject to annual revision.

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|----------------------|--|----------|--|--|--|
| Application Number | The state of the s | <u> </u> | | | |
| Filing Date | | | | | |
| First Named Inventor | Timothy Regan | | | | |
| Examiner Name | | | | | |
| Group Art Unit | | | | | |
| Attorney Docket No. | | <u> </u> | | | |

| METHOD OF PAYMENT | FEE CALCULATION (continued) | | | | | |
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| The Commissioner is hereby authorized to charge | 3. AD | DITI | ON/ | L FE | ES | |
| indicated fees and credit any overpayments to: | Large Small | | | | | |
| Deposit Account | . . | Entity | • | Entit | • | Fee Paid |
| Number | Fee Code | (\$) | Code | | Fee Description | |
| Deposit Account | 105 | 130 | 205 | 65 | Surcharge - late filing fee or oath | |
| Charge Any Additional Fee Required | 127 | 50 | 227 | 25 | Surcharge - late provisional filing fee or cover sheet | |
| Under 37 CFR 1.18 and 1.17 Applicant claims small entity status. | 139 | 130 | 139 | 130 | Non-English specification | |
| See 37 CFR 1.27 | 147 2 | ,520 | 147 | 2,520 | For filing a request for ex parte reexamination | |
| 2. Payment Enclosed: X Check Credit card Money Other | 112 | 920* | 112 | 920* | Requesting publication of SIR prior to Examiner action | |
| FEE CALCULATION | 113 1 | ,840* | 113 | 1,840* | Requesting publication of SIR after Examiner action | |
| | 115 | 110 | 215 | 55 | Extension for reply within first month | |
| 1. BASIC FILING FEE Large Entity Small Entity | 116 | 390 | 216 | 195 | Extension for reply within second month | |
| Fee Fee Fee Fee Description | 117 | 890 | 217 | 445 | Extension for reply within third month | |
| Code (\$) Code (4) | 118 1 | .390 | 218 | 695 | Extension for reply within fourth month | ļ |
| Leady and the second se | 128 1 | ,890 | 228 | 945 | Extension for reply within fifth month | |
| 106 320 206 160 Design filing fee | 119 | 310 | 219 | 155 | Notice of Appeal | |
| 108 710 208 355 Reissue filing fee | 120 | 310 | 220 | 155 | Filing a brief in support of an appeal | |
| 114 150 214 75 Provisional filing fee 75.00 | 121 | 270 | 221 | 135 | Request for oral hearing | |
| | 136 1 | 1,510 | 138 | 1,510 | Petition to institute a public use proceeding | |
| SUBTOTAL (1) (\$) 430.00 | 140 | 110 | 240 | 55 | Petition to revive - unavoidable | |
| 2. EXTRA CLAIM FEES | 141 1 | ,240 | 241 | 620 | Petition to revive - unintentional | |
| Fee from Extra Claims below Fee Paid | 142 1 | 1,240 | 242 | 620 | Utility issue fee (or reissue) | |
| Total Claims -20** = X = | 143 | 440 | 243 | 220 | Design issue fee | |
| Independent 3** = X = | 144 | 600 | 244 | 300 | Plant issue fee | <u> </u> |
| Multiple Dependent = | 122 | 130 | 122 | 130 | Petitions to the Commissioner | |
| | 123 | 50 | 123 | 50 | Processing fee under 37 CFR 1.17(q) | |
| Large Entity Small Entity Fee Fee Fee Fee Fee Description | 126 | 180 | 126 | 180 | Submission of Information Disclosure Strit | |
| Code (\$) Code (\$) 103 18 203 9 Claims in excess of 20 | \$81 | 40 | 581 | 40 | Recording each patent assignment per property (times number of properties) | |
| 102 80 202 40 Independent claims in excess of 3 | 146 | 710 | 246 | 355 | Fiting a submission after final rejection (37 CFR § 1.129(a)) | |
| 104 270 204 135 Multiple dependent claim, if not paid 109 80 209 40 ** Reissue independent claims over original patent | 149 | 710 | 249 | 355 | For each additional invention to be examined (37 CFR § 1.129(b)) | |
| | 179 | 710 | 279 | 355 | Request for Continued Examination (RCE) | |
| 110 18 210 9 ** Reissue claims in excess of 20 and over original patent | 169 | 900 | 169 | 900 | Request for expedited examination of a design application | |
| SUBTOTAL (2) (\$) () | Other | fee (s | pecify | /) | THE RESIDENCE OF THE PROPERTY | |
| **or number previously paid, if greater; For Reissues, see above | •Redu | iced p | у Ваз | ic Filing | Fee Paid SUBTOTAL (3) (\$) 0 | |

| SUBMITTED BY | Complete (if applicable) | | | |
|-------------------|--------------------------|--------------------------------------|-----------|----------------|
| Name (Print/Type) | Timothy P. Regan | Registration No. (Attorned Agent) | Telephone | (570) 876-0230 |
| Signature | I with P. Rem | | Date | 07-06-2001 |

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